

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	ALS	ID NO.	DATE
FEE DETERMINATION	5m		07-06-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	F.S.	1116	08/18/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	4	9	3	12	Date
1	✓	✓	✓	✓	✓	✓	
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10	✓	✓	✓	✓	✓	✓	
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18	✓	✓	✓	✓	✓	✓	
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27	✓	✓	✓	✓	✓	✓	
28	✓	✓	✓	✓	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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